

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 10-593,025		FILING DATE				
							APPLICANT(S)						
CLAIMS													
	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT			AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1						51						
2		1					52						
3	1						53						
4		1					54						
5	1						55						
6	1	1					56						
7	1		1				57						
8		1		1			58						
9		1		1			59						
10		1		1			60						
11	1						61						
12	1						62						
13	1						63						
14		1					64						
15		1					65						
16	1		1				66						
17		1		1			67						
18		1		1			68						
19		1		1			69						
20	1		1				70						
21		1		1			71						
22		1		1			72						
23		1		1			73						
24	1		1				74						
25		1		1			75						
26		1		1			76						
27	1						77						
28	1						78						
29							79						
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42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	13	↓	4	↓		↓	TOTAL IND.		↓		↓		↓
TOTAL DEP.	15	←	11	←		←	TOTAL DEP.		←		←		←
TOTAL CLAIMS	28		15				TOTAL CLAIMS						

PTO - 1360 (REV. 11/04)

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